

CODICIL FORM

To add Dyscover to your Will, please sign this form in front of two witnesses. Your witnesses should not stand to benefit themselves or be married to anyone who stands to benefit from your Will or this Codicil, and they must both sign the form when you do.

We also advise you to see your Solicitor.

The Codicil must be kept with your Will.

YOUR DETAILS AND CODICIL TO YOUR CURRENT WILL

I (full name):

Of (full address, including postcode):

Declare this to be the _____ (first, second or appropriate number) Codicil to the Will I made on
(write date in words):

YOUR WISHES

EITHER I leave the following sum of (amount in figures and then in words) to Dyscover.

£

Amount in words:

OR I leave the residue of my estate to Dyscover (indicate YES if this is the case).

OR A percentage (%) amount of the share of the residue of my estate to Dyscover (show amount in figures and words):

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Long-term support and opportunities for people with aphasia

YOUR SIGNATURE AND CONFIRMATION OF WISHES

I confirm that the other aspects covered in my Will and any other Codicils are correct.

Your Signature:

Date:

YOUR WITNESSES NEED TO FILL IN THIS SECTION

We confirm that this Codicil was signed by the aforementioned person in our joint presence and then by us in his/her presence.

Witness 1

Name (in full):

Address (including postcode):

Occupation:

Signature:

Date:

Witness 2

Name (in full):

Address (including postcode):

Occupation:

Signature:

Date:

All personal data is securely held by Dyscover Ltd and will never be shared, sold, loaned or otherwise made available to any third party.

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